



# Department of Public Health and Human Services

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## **CMS CERTIFIED HOSPITAL, CRITICAL ACCESS HOSPITAL, & AMBULATORY SURGICAL CENTER PROVIDERS Life Safety Code Categorical Waivers Provider Notice: 02202014**

This document will assist health care facilities certified by the Centers for Medicare and Medicaid Services (CMS) in applying for a new type of CMS approved Life Safety Code Categorical Waiver (waiver). These waivers acknowledge newer versions of the National Fire Protection Association's (NFPA) Codes. Currently, certified health care facilities are required to comply with the 2000 Edition of NFPA 101 Life Safety Code and its mandatory references in Chapter 2. CMS issued the following Survey and Certification (S&C) guidance regarding the areas to which these waivers may apply.

- S&C-10-04-LSC: Waiver to Allow Hospitals to Use the NFPA 6-Year Damper Testing Interval, Issued October 30, 2009
- S&C-13-25-LSC & ASC: Relative Humidity (RH): Waiver of Life Safety Code (LSC) Anesthetizing Location Requirements; Discussion of Ambulatory Surgical Center (ASC) Operation Room Requirements, Issued April 29, 2013

The DPHHS, Quality Assurance Division, Certification Bureau (Bureau) has developed attestations that may be used by facilities choosing to use one or more of the new CMS waivers. The attestations provided a checklist for the facility staff as well as the survey staff to ensure compliance. If you have questions regarding the waivers, the S&Cs or the survey process, please call the Bureau office at 406-444-2099 or email [MTSSAD@mt.gov](mailto:MTSSAD@mt.gov).

## CERTIFIED HOSPITAL OR CRITICAL ACCESS HOSPITAL CATEGORICAL WAIVER

### 6 YEAR DAMPER TESTING OPTION FOR HOSPITALS ONLY

References: S&C-10-04-LSC Waiver to Allow Hospitals to Use the NFPA 6-Year Damper Testing Interval, NFPA 80 Standards for Fire Doors and Other Protectives, 2007 Edition, NFPA 105 Standard for the Installation of Smoke Door Assemblies and Other Opening Protectives, 2007 Edition.

**Attestation: 02202014#1**

*This waiver allows hospitals only to use a six year as opposed to a four year testing interval for smoke and fire dampers.*

#### Checklist of requirements:

- ☐ All fire and smoke dampers are tested on a six year basis per the requirements of NFPA 80 and NFPA 105, 2007 Editions.
  - ☐ Each damper must be tested and inspected one year after installation.
  - ☐ Existing dampers shall be tested and inspection every 6 years for hospitals.
  - ☐ Full unobstructed access to the fire and/or smoke dampers shall be verified and corrected.
  - ☐ Fusible links, if provided, shall be removed for testing to ensure full closure and lock-in-place if so equipped.
  - ☐ Damper operational tests shall verify that there is no damage interference due to rusted, bent, misaligned, or damaged frame or blades, or defective hinges or other moving parts.
  - ☐ Damper frame shall not be penetrated by any foreign objects that would affect damper operations.
  - ☐ Dampers are not blocked in any way from closure.
  - ☐ Fusible link shall be reinstalled after testing is complete.
  - ☐ Painted or damaged fusible links shall be replaced with the same size, temperature, and load rating link.
  - ☐ Documentation of all inspections shall be keep indicating the location of the damper, date of inspection, name of inspector, and deficiencies discovered.
  - ☐ Documentation shall have a space to indicate when and how deficiencies were corrected.
  - ☐ All documentation shall be maintained and made available for inspection by State of Montana surveyors.
  - ☐ The tests shall be conducted with normal Heating, Ventilating, and Air Conditioning airflow.
  - ☐ Smoke control systems shall be tested per NFPA 92A Standards for Smoke Control Systems Utilizing Barriers and Pressure Differences, 2006 Edition and Section 8.6 Periodic Testing.

Facility Name: \_\_\_\_\_

CMS Provider Number: 27 \_\_\_\_\_

Printed name of provider/supplier representative's signature attesting to compliance with 2007 Edition of NFPA 80 and NFPA 105, 2007 Edition, Sections 19.4 and 6.5 respectively:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **CERTIFIED HOSPITAL, CRITICAL ACCESS HOSPITAL, OR AMBULATORY SURGICAL CENTER CATEGORICAL WAIVER**

RELATIVE HUMIDITY TO BE MAINTAINED AT  $\geq 20\%$

References: S&C 13-25-LSC & ASC Relative Humidity (RH): Waiver of Life Safety Code (LSC) Anesthetizing Location Requirements; Discussion of Ambulatory Surgical Center (ASC) Operating Room Requirements, 2012 Edition of NFPA 99 Health Care Facilities Code, and ASHRAE Standard 170 Ventilation of Health Care Facilities, 2008 Edition, and Addendum d to Standard 170-2008

**Attestation: 02202014#2**

*This waiver allows facilities to maintain relative humidity in anesthetizing areas at a lower level than 35% as required in NFPA 99, Standard for Health Care Facilities, 1999 Edition.*

Checklist of the requirements:

- ☐ Relative Humidity (RH) will be maintained per American Society for Heating, Refrigerating, and Air Conditioning Engineers (ASHRAE) Standard 170 Ventilation of Health Care Facilities, 2008 Edition, and Addendum d to Standard 170-2008 of  $\geq 20\%$  RH
  - ☐ Surgical and Critical Care
    - ☐ Class B and C Operation Rooms
    - ☐ Operating/Surgical Cystoscopic Rooms
    - ☐ Delivery Room (Caesarean)
    - ☐ Treatment Room – Bronchoscopy Room or Treatment Rooms involving procedures that require the use of nitrous oxide
    - ☐ Trauma Room (crisis or shock)
    - ☐ Laser Eye Room
    - ☐ Class A Operating/Procedure Room
  - ☐ Diagnostic and Treatment
    - ☐ Gastrointestinal endoscopy procedure room
- ☐ The reduction of RH does not negatively affect ventilation system performance.

Facility Name: \_\_\_\_\_

CMS Provider Number: 27 - \_\_\_\_\_

Printed name of provider/supplier representative's signature attesting to compliance with NFPA 99, 2012 Edition for relative humidity in anesthetizing areas an Addendum d to the ASHRAE Standard 170- 2008:

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Signature: \_\_\_\_\_ Date: \_\_\_\_\_